## **Blood-Stream Infection (CDC)**

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**To:** Blood-Stream Infection (CDC)

Subject: Draft Comments

Thank for the public comment opportunity for this document.

I am unclear as to why the recommendation for antisepsis of skin for PIV's is 70% isopropyl alcohol and for hubs/access ports chlorhexidine is preferred. Both have instant kill properties and accessing an injection site/hub/access port involves cleansing, dry time, and immediate access. If the benefit of CHG is its extended kill time, why would it be needed for hub and not for skin? Shouldn't this be chlorhexidine for skin and alcohol for hubs?

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